

A tin foot on each side of the steamer gives its support, and obviates the expense and disadvantage of making the vessel flat at bottom.

At a red heat, the weight B, placed in C, and shut up there, will heat the water in A, and generate steam for a long time. Such a steamer may be placed under the bed-clothes with safety; or the steam may be conveyed by a tin tube from G to the patient's bed or chair. For expedition the water may be hot when placed in A.

The usual mode of sustaining the bed-clothes by hoops will do very well where moist heat is desirable; but for the application of either dry or moist heat at pleasure, the following instrument is useful. It consists of two parallel tin plates of semicircular form, half an inch apart, and large enough to cover the whole body. It resembles in shape a common wagon-cover. By placing either steam or hot water in the interspace, dry heat is produced; or by throwing the steam into the cavity which holds the body of the patient, moist heat is obtained. As this can be laid over the patient in bed, it saves the trouble of moving and replacing him.

*Case of Spasm and Severe Pain relieved by Ligature.* Reported by J. K. MITCHELL, M. D.—E. A. a female, aged seventeen, of good constitution and regular habits, resident in Sixth below Spruce, was attacked in the afternoon of the 15th of July, 1832, with slight cramp in the lower extremities, affecting chiefly the calves of the legs. These cramps increased in force as the day advanced, and in the evening a profuse alvine evacuation of a very liquid character, was followed by nausea and pain in the abdomen. After going to bed she vomited copiously, for about half an hour, frothy, yellowish flocculent matter of a bitter taste. At eleven P. M. the pain in the abdomen became very severe, and the intervals between the spasmodic attacks very short. The family administered laudanum freely, applied injections, sinapisms, heat, and castor oil, without effect, and finally at half past 12 A. M. of the 16th, sent for me.

I found her hands and feet cold and clammy, her pulse nearly natural, her countenance irregularly coloured, or flushed in ill-defined spots. Incessant motion and mournful cries expressed the severity of her pain. No evacuation of any kind had occurred after eleven o'clock, nor had there been any cessation of pain.

Bled her thirty-six ounces, administered laudanum and castor oil, ordered enemata, sinapisms, and dry heat with frictions. At half past one, no abatement of symptoms. Applied a tourniquet round the middle of the forearm so tightly as to demand nearly all my strength in turning the key. An immediate removal of pain and nausea ensued; the patient lost the irregular flush—the extremities became warmer, and every morbid symptom disappeared. To try the effect, the tourniquet was loosened, and the pain immediately recurred. It was then kept tight for an hour, when it was relaxed without inconvenience. Soon after I left the patient the pain and nausea returned, and the nurse endeavoured in vain to check them by the tourniquet. At half past 5 A. M. I found the case as at 11 P. M. and on tightening the tourniquet *which was badly screwed up*, I again succeeded in suppressing the symptoms. At this visit I sent for my late pupil Dr. Smiley, and after relaxing and tightening it; the tourniquet, demonstrated the perfect control in which the pain and nausea were held.

Ordered a pill of ol. croton, grt. j., tart. emet. gr. 1-6th; calomel, grs. ij.; rhei pulv. grs. iv. To be repeated every hour until effective. At 10 A. M. found that five pills had been taken, and an alvine evacuation of black fetid matter of the consistency of tar had been passed.

At 12 o'clock Dr. T. Harris saw the case with me. At this visit the nausea returning, it was instantly checked by tightening the tourniquet.

Once in the course of the day the pain returned slightly, and the vomiting recurred twice. In every instance the symptoms were removed by the tourniquet.

17th, 4 P. M.—The case is apparently convalescent.

*Remarks.*—The remarkable effect of the tourniquet in so severe a case, where ordinary measures for cure vigorously applied, totally failed to abate a single symptom or to allay a single pang, renders this remedy worthy of further trial. Hitherto experiments with it have not been made extensively enough to fix its relative value. The objections of the patient have commonly prevented the physician from making it tight enough, and the practitioner has been deterred by the dread of sphacelation. Neither should be regarded, because the patient approves when he observes the beneficial result, and the circulation cannot be entirely checked in the interosseous vessels of the *forearm*. The beneficial effect is only complete, when the hand is brought to a close resemblance to that of a patient under *cholera asphyxia*.

In the present case the tourniquet remained tight for four successive hours without the slightest subsequent disadvantage. In cases of great severity, the screw should be turned until the good effect is obtained, for it is almost certain to follow an adequate application.

This remedy, originally Japanese, travelled through China to the Russians, and was brought with the cholera into Europe, where it was occasionally approved in practice.

It is to be observed, that for a cure, ordinary medical means must be employed, for the tourniquet only holds pain and spasm in temporary check.

*On Asiatic Cholera Morbus.* By PAUL M. EVE, M. D. of Augusta, Georgia. —Believing it criminal to withhold from the medical profession anything on the Cholera Morbus at this moment, and conceiving it a duty to comply with the request of the editor of the American Journal of the Medical Sciences, I send the following observations which were made last summer while I was in Europe. I had felt a reluctance to make a further communication to the public on this engrossing subject, which was warranted and justified from my late situation in the Polish army; my time and attention having been almost exclusively devoted to surgical cases, and opportunities of investigating this disease having been comparatively limited. If it is thought, however, that my observations, imperfect as they are, and that my opinion, humble as it is, can in any way serve my fellow-labourers in the treatment of this modern plague, I most willingly and cheerfully present them my views on the subject.

As I have neither time nor inclination to write a long article, I will briefly state the principal symptoms of the Asiatic Cholera Morbus, the appearances on dissection, and then deduce from them the treatment. An attack is usually preceded by diarrhœa or by uneasiness in the stomach and bowels for some days, or is suddenly announced by vomiting and purging, commencing about three o'clock in the morning, when the temperature is lowest of the twenty-four hours; and is followed and accompanied by cramps or spasmodic contractions of the abdomen. There is great prostration of the animal powers; shrinking of the external parts, particularly of the features, which assume in many places as well as the fingers and toes, a leaden or purple appearance; a cold and moist or even a wet skin, conveying when felt, the sensation of touching a frog; great thirst; the tongue is blue and cold, or moist and partly covered with a white fur; the pulse is either imperceptible at the wrist or is quick, frequent, feeble and intermitting; respiration is slow and very difficult; the voice is much altered, questions and answers being made in a low whisper; the secretions, particularly of the kidneys, are diminished, except into the alimentary canal, where they are altered and augmented, without however any bile; purging and vomiting, sometimes one only, but generally both; first the contents of the stomach and intestines are discharged, and then a peculiar whitish fluid resembling rice-gruel or sero-albuminous matter; and lastly, cramps of the extremities, most frequently of the legs, and which may be compared to a bayonet piercing the calf or most muscular part.

The appearances after death, were almost constantly the same. The external parts were very much diminished in size; the extremities, the nose, lips, eye-